

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No. 4041L-000070/DVB

First Inventor Jason F. Hunzinger, et al.

Title RAPID ACQUISITION AND SYSTEM SELECTION OF MOBILE WIRELESS DEVICES USING A SYSTEM MAP

Express Mail Label No. EL623311719US

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: <small>Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450</small>	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original and a duplicate for fee processing)</small>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	
2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small>		8. Nucleotide and/or Amino Acid Sequence Submission <small>(if applicable, all necessary)</small>	
3. <input checked="" type="checkbox"/> Specification <small>[Total Pages 26]</small> <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> - Descriptive title of the Invention <input checked="" type="checkbox"/> - Cross References to Related Applications <input checked="" type="checkbox"/> - Statement Regarding Fed Sponsored R & D <input checked="" type="checkbox"/> - Reference to sequence listing, a table, or a computer program listing appendix <input checked="" type="checkbox"/> - Background of the Invention <input checked="" type="checkbox"/> - Brief Summary of the Invention <input checked="" type="checkbox"/> - Brief Description of the Drawings (<i>if filed</i>) <input checked="" type="checkbox"/> - Detailed Description <input checked="" type="checkbox"/> - Claim(s) <input checked="" type="checkbox"/> - Abstract of the Disclosure <input checked="" type="checkbox"/> 		a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: <ul style="list-style-type: none"> i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <small>[Total Sheets 5]</small>		ACCOMPANYING APPLICATIONS PARTS	
5. Oath or Declaration <small>[Total Pages 3]</small> <ul style="list-style-type: none"> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <small>(for a continuation/divisional with Box 18 completed)</small> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small> 		9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney <small>(when there is an assignee)</small>	
6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		11. <input type="checkbox"/> English Translation Document (<i>if applicable</i>) 12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input checked="" type="checkbox"/> Preliminary Amendment 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <small>(Should be specifically itemized)</small> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small> 16. <input type="checkbox"/> Request and Non Publication under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other: _____	

18. If a CONTINUATING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation Divisional Continuation-in-part (CIP)

of prior application No: 09 / 476,301

Prior application information: Examiner James K. Moore

Group / Art Unit: 2686

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label		27572 <small>(Insert Customer No. or Attach bar code label here)</small>		or <input type="checkbox"/> Correspondence address below	
Name	Harness, Dickey & Pierce, P.L.C.				
Address	P.O. Box 828				
City	Bloomfield Hills	State	MI	Zip Code	48303
Country	United States of America	Telephone	248-641-1600		Fax 248-641-0270

Name (Print/Type)	Michael J. Schmidt	Registration No. (Attorney/Agent)	34,007
Signature			Date December 5, 2003

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10/7/2003
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FEE TRANSMITTAL for FY 2004

Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)
770

Complete if Known

Application Number	To Be Assigned
Filing Date	Herewith
First Named Inventor	Jason F. Hunzinger, et al.
Examiner Name	James K. Moore
Art Unit	2686
Attorney Docket No.	4041L-000070/DVB

METHOD OF PAYMENT (check all that apply)

 Check Credit card Money Other None
Order
 Deposit Account:Deposit Account Number
08-0750Deposit Account Name
Hamess, Dickey & Pierce, P.L.C.

The Director is authorized to: (check all that apply)

 Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid		
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	770	2001	385		
1002	340	2002	170		
1003	530	2003	265		
1004	770	2004	385		
1005	160	2005	80		
SUBTOTAL (1)		(\$ 770)			
2. EXTRA CLAIM FEES					
Total Claims	1	-20 **	= 0		
Independent Claims	1	-3 **	= 0		
Multiple Dependent			X = 0		
Large Entity		Small Entity			
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9		
1201	86	2201	43		
1203	290	2203	145		
1204	86	2204	43		
1205	18	2205	9		
SUBTOTAL (2)		(\$ 0)			
Other fee (specify) _____					
*Reduced by Basic Filing Fee Paid					
SUBTOTAL (3)		(\$ 0)			

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY		Complete if applicable		
Name (Print/Type)	Michael J. Schmidt	Registration No. Attorney/Agent	34,007	Telephone (248) 641-1600
Signature			Date	December 5, 2003

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